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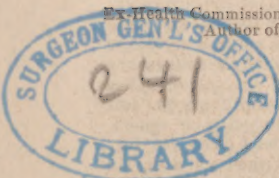
A

LETTER ON CHOLERA; ITS CAUSES AND CURE.

ADDRESSED TO THE EDITORS OF THE NEW YORK SUN.

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Dr. Dickson, of London.



From the New York Sun, July 20, 1849.

CAUSE AND CURE OF THE CHOLERA.

*To the Editors of the Sun.—Gentlemen:—*Shortly after your favorable notice of my reprint of the Treatise of Dr. Dickson, of London, entitled "Revelations on Cholera; its causes and cure," wherein he demonstrates that the disease is caused by a spasm or palsy of the eighth pair of nerves, viz. those which communicate reciprocally between the brain, and the stomach and lungs, a friend referred me to an article in the Medical Repository, published in this city in 1807, written by Dupuytren (a name distinguished among the *savans* of France) which fully corroborates the Dr.'s theory on Cholera. On referring to the article, I find it one of great interest; but too long for your columns. I send you, however, some extracts. The following are Dupuytren's conclusions:—

1. The simultaneous section of the two nerves of the eighth pair is always mortal.
2. This section induces an asphyxia, which continues a longer or shorter time, depending on the species of animal submitted to the experiment.
3. This asphyxia is characterized by symptoms of affections which manifest themselves in cutting of the nerves, and particularly by a *black and coaly color* which the blood of the arteries and veins assumes. [Accounts for the black skins of those who die of cholera.]
4. While this asphyxia lasts, the air does not cease for a moment to penetrate the lungs, nor the blood to circulate through them; which establishes, in an invincible manner, that this disease is not induced by a suspension of the motions of the breast, nor by that of the heart, but by a suspension of the action of the lungs.
5. By means of a simple *compression* of the eighth pair of nerves, exercised, suspended, or continued during a short space of time, *we can produce this asphyxia, cause it to cease, or render it mortal*; whence it results, that in all cases in which it happens, in consequence of the section or compression of those nerves, it can have no other cause than their destruction.
6. Seeing the cutting of the eighth pair of nerves interrupts respiration, this function, in a state of health, takes place under the influence of the nerves which distribute themselves to the lungs; under that of the brain, whence they proceed; and, consequently, under the influence of life, of which the influence of the nerves and brain is no more than a condition.

It is then the same with respiration as with all the other functions; a first cause essentially attached to life presides over its existence; it determines and regulates the action of chemical affinities. It is from this first cause we must set out in our examination of respiration, as in that of all the other functions, in order to understand the physical, mechanical and chemical phenomena, and to form an accurate judgment of their changes.

Dupuytren made a great number of experiments on horses and dogs, and was "convinced that the same results always resulted from them."

"We threw down," he says, "a gelding of a dapple grey color, seven or eight

years old, and strong, although attacked with glanders. We began by cutting one of the nerves of the eighth pair, and he showed no greater signs of pain or disorder in the pulmonary function than the former [horse, of which one nerve only had been cut], but we had scarcely begun to cut the second nerve of the eighth pair, when the horse exhibited the most extraordinary agitations; and we had no sooner cut this nerve, than the horse, opening his mouth, dilating his nostrils, stretching his neck, and exercising all his inspiratory powers, breathed painfully by the mouth and nostrils, and uttered a horribly plaintive sound, similar to that of broken winded horses, but stronger and more frightful. At the same time he made violent and fruitless attempts to vomit."

"The usual phenomena of the section of both nerves is a violent agitation of all the members; the efforts to vomit in a horse are useless."

In the dog, when the nerves of both sides are cut, he "vomits and loses his voice." The nerves being compressed by an instrument, he says, "we had scarcely commenced when snorting and violent efforts to vomit were manifested. Life appeared completely gone. The compression being taken off, the breathing gradually returned. We succeeded by similar alternate compressions, renewed and suspended with discernment, to cause the same dog to *'pass several times from life to apparent death.'*"

The perusal of the whole article serves to confirm me in an opinion I had for some time entertained—that the practice of the Faculty in this disease was, as in many other instances, all wrong. That the vomiting is an abortive effort of nature to relieve the pressure upon these vital nerves, and that when this pressure does not yield to the ordinary remedies used for cholera, the tactics should be immediately changed, and active emetics resorted to in order to assist nature in throwing off the palsy or spasm. Under this belief, I have not hesitated to administer these emetics, and I have not lost a patient. The gentleman at the Society Library, who kindly furnished me with the opportunity of examining Dupuytren's work, proved to be himself a physician, Dr. Neal. In conversation, he stated that in 1832, he treated cholera the regular way with the usual result. But in 1834, he changed his practice, gave Tartar emetic, sometimes as much as a scruple at a dose, and saved all his patients.

The following extract from Dr. Dickson confirms this view;—

"Intelligent practitioners have observed that where repeated violent vomiting was a prominent symptom, recovery more often took place than where this was either less violent or altogether wanting. Dr. Denman has made a similar remark regarding vomiting in hemorrhage:—'When patients have suffered much from loss of blood,' he says, 'they will often have a sudden and violent fit of vomiting; and sometimes under circumstances of such extreme debility, that I have shrunk with apprehension lest they should have been destroyed by a return or increase of the hemorrhage, which I concluded was inevitable after so violent an effort. But there is no reason for this apprehension; for though the vomiting may be considered as a proof of the injury which the constitution has suffered by the hemorrhage, yet the action of vomiting contributes to its suppression, and to the immediate relief of the patient, perhaps by some revulsion, and certainly by exciting a more vigorous action by the remaining powers of the constitution; AS IS PROVED BY THE AMENDMENT OF THE PULSE, AND OF ALL OTHER APPEARANCES, IMMEDIATELY AFTER THE VOMITING.' Mr. John Hunter looks upon vomiting in nearly the same light; although produced by debility of the brain in the first instance, it has the effect to reflect strength back on the constitution. I am disposed to entertain a favorable opinion of ipecacuan in certain cases of cholera. In nine successive female cases, where I employed large doses of ipecacuan, I must ascribe the recovery which took place in all in some degree to the remedy."

My usual prescription is, two grains each of tartar emetic, sulphate of copper and turpeth mineral, given either as a powder in a little syrup or molasses, or as a pill—one dose proving generally sufficient. In from one to three hours the heat of the body returns, the breathing becomes easy, copious perspiration follows, and bile appears in the vomiting and by stool. Hot tea, a cup-full at a time, either of balm, pennyroyal, chamomile, or simply hot water alone (as hot as the patient can bear it), should be given every fifteen minutes. The vomiting may be arrested after the appearance of the bile, by half a wine-glass of raw brandy. If this be thrown up, a second dose commonly succeeds. If preferred, ether with spirits of camphor may be given, or a strong tea of cloves or cinnamon. Another prescription is sometimes more prompt and quick, viz.: ten grains of turpeth mineral (yellow sub-sulphate of mercury) in a little molasses. These are doses for adults.

Your obt serv't,

WM. TURNER, M. D.

From the New York Sun, July 27th, 1849.

EMETICS IN CHOLERA.

Editors Sun:—Foreign Medical Journals, &c., contain further proofs of the efficacy of this treatment.

Dr. Venables, on the Nature of Treatment of Cholera, page 35, says,—“In the stage of collapse, the *best* method of inducing reaction, is by the repeated administration of a warm saturated solution of salt, till full vomiting, with some degree of reaction, succeeds.”

Mr. Baker, of the Bengal Establishment, says that he thinks that the *most successful* treatment was an emetic in the first instance, which induced full vomiting, *quite different* from the spasmodic action caused by the disorder; afterwards five grain doses of antimony with or without calomel.

Dr. Mackenzie, in the London Medical Gazette, says,—“Emetics of ipecacuanha were frequently given as a *safe stimulant* to effect a reaction and restore the blood to the surface. I have seen an emetic *bring up food*, though there had been vomiting and purging in a *violent degree some hours* previous to its administration. I have given an emetic in a tumbler full of French brandy with advantage.”

Rev. Azariah Smith, M. D., Missionary of the American Board to the Armenians of Turkey, writes from Aintab, Turkey in Asia,—“If a person be *suddenly* seized with an active diarrhea and severe pain in the bowels, an *active emetic* of ipecac, a scruple at a dose, repeated once in ten minutes till it operates, will produce a *most excellent effect*, especially if the stomach be recently distended with food. If any thing is needed to quicken the action of the ipecac, add some astringent emetic, as sulphate of zinc five grains, or sulphate of copper three grains to each dose. To secure a return of bile to the discharges, turpeth mineral, three grains, may be added to each dose of the ipecac, in place of the sulphate of zinc, &c.”

At home, in addition to the testimony of Drs. Turner and Neal, we have that of Dr. Shew, the hydropathist, who declares that he produced successful results by producing vomiting by the copious administration of blood-warm water.

For the greater portion of the above facts, we are indebted to the New York Journal of Medicine for July, the organ of the *regular faculty* of the City of New York.

W. T.

From the Sun, August 2, 1849.

The *Richmond Republican*, in commenting upon the Cholera, remarks that at least five blacks die to one white, on account of their having less control of their appetites, in addition to their belief that “a man’s time is fixed.” It relates the following anecdote:

“What is amusing, even in so serious a matter as an attack of the Cholera, is the uniform pertinacity with which its colored subjects will deny to their medical attendants that they have eaten anything which could make them sick. An eminent physician of our city informed us that, on being called to a negro suddenly attacked with Cholera, he asked him whether he had been eating fruit or vegetables. ‘No, sir,’ was the reply, ‘nothing of the kind.’ ‘What! have you eaten no apples or cherries?’ ‘No, no,’ said the negro, ‘I never eats ’em any time of the year.’ The physician administered a vomit, the result of which was the ejection of about a quart of apples—stems, seeds, and all! ‘Well,’ said the doctor, ‘are these not apples?’ ‘Yes, sir, they are, that’s a fact.’ ‘Well, how did they get into you if you did not eat them?’ ‘Please God, massa, I don’t know, but I never eat anything of the kind.’”

The conclusion to which the medical gentleman came was, that the only way to get the truth out of a negro is to vomit it out of him, and even then he won’t own it. We have been informed of two white cases, last week, where an emetic promptly administered, would probably have saved life. Two women, of this city, had a feast together of cucumbers and clams. One of them was taken the same afternoon with the epidemic, and was conveyed to the hospital where she died in the evening. The other woman died on the following day. A tepid water emetic, such as Priessnitz or Dickson would recommend, would no doubt have brought away the cucumbers and clams, and recovered the women. If the stomach is foul, why not rinse it out? Common sense dictates such a course.

Dr. Stickney of this city, was called lately to a patient, pulseless, cold and near death. He gave him strychnia and a large quantity of tincture of muriate of iron. In an hour and a half, the patient suddenly vomited two or three quarts of black colored liquid; from which moment, he gradually recovered. So much for vomiting, when of the right kind.

From the same.

Requests to publish the Recipe for Diarrhea or Cholericine come to us in such numbers, that we think it of importance to state, that the recipe can now be obtained at almost any Apothecary's store throughout the city, prepared in bottles. It is also in extensive use in neighboring cities and villages, and is known as the "*Sun's Recipe*," and by asking for it by that name, the Apothecaries will understand the medicine wanted. Every apothecary, however, does not keep it of the same quality, and purchasers should go to such stores as they have most confidence in, for supplying medicines from the purest qualities of the ingredients.

We again publish the Recipe, as requested:

RECIPE FOR THE CURE OF CHOLERINE.

Take equal parts of—

Tincture of Laudanum,
 " Cayenne Pepper, treble strength;
 " Rhubarb;
 Essence of Peppermint, treble strength;
 Spirits of Camphor;

Mix in a bottle; dose from 5 to 30 drops, according to violence of symptoms. To be repeated in ten or fifteen minutes, if needed.

An American traveller, sojourning in London, thus writes to his friends at home by the last steamer:—

"I could not help laughing heartily at your description of mother's fears of *Cholera*, and the flannel band. Here we are in the midst of it they say, and we never dream of fear. I think if any of us should take it, Dr. Dickson (author of the Chrono-Thermal system) of all persons in the world, would be the most speedily sent for. They say he is very successful in his treatment."—*N. Y. Mirror*, Aug. 1.

A D D E N D A .

Further researches among Foreign Medical Works (since the foregoing was published) furnish still more proofs of the success of the treatment here advocated, viz.:

Dr. McCann recommends "a table spoonful of mustard, or double that quantity of common salt, in half a pint of warm water; a third part of either to be taken every ten minutes until free vomiting be produced."

The treatment by tartar emetic originated in Italy, and came under the notice of Mr. Stott of Manchester, by whom, and by others at his suggestion, it was extensively used in 1832. Dr. C. R. Hall, of London, states that it was very efficacious. He says:—*"The distinction between spontaneous vomiting, and vomiting artificially induced, must be borne in mind. The former exhausts far more rapidly and seriously than the latter. Tartar emetic never kills by vomiting."* As the results of his experience, he thus concludes:—"The advantages of this treatment were found to be, (1) its superior efficacy as a means of cure; (2) its speed in operation in curing; (3) the absence of the fever of reaction, a result not ordinarily attending the other modes of treatment."

Dr. Shearman, of Rotherham, says:—"In 1832 I only became acquainted with Mr. Stott's treatment by Tartar Emetic, when the disease was subsiding; but all the cases I treated with it certainly recovered."

Mr. Hancorn begins his treatment with "a very gentle emetic of two scruples of ipecac."

Dr. Leonard Stewart has succeeded with the tartar emetic; also a friend who had been long in the East Indies.

Mr. Hird recommends mustard emetics every hour or half hour.

See *Braithwaite's Retrospect*, part 18.